

Personal Campaign Committee

Statement of Dissolution

Candidate Information

Name	Telephone Number		
Lisa Galvez	(801)392-8591		
Office	District Number	Party Cou	nty of Election
State School Board	2	Non-Partisa M ulti-Cou	nty
Street Address	Suite/Apartment/PO Box	City	State Zip
2660 W 2400 S		West Haven	UT 84401

I,	Lisa Galvez		
	(Name of Candidate)		
	affirm that my account balance is zero, I have closed my campaign account, dissolved my campaign committee, and I will no longer be receiving contributions or making expenditures for political purposes as a candidate for the above office.		
	admin		
	Signature of Candidate		
	10/13/2010		
	Date		

To File this Form

Mail or deliver to
Office of the Lieutenant Governor
Utah State Capitol, Suite 220
Salt Lake City, UT 84114
(801)538-1133

For More Information

Contact the Lieutenant Governor's Office (801)538-1041 1-800-995-VOTE (8683) disclosure@utah.gov

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	Date Received